



MICHIGAN DEPARTMENT OF NATURAL RESOURCES  
PARKS AND RECREATION DIVISION

## VOLUNTEER CAMPGROUND HOST APPLICATION

By authority of Part 741 of Act 451, P.A. 1994, as amended this information is required to be considered for a campground host position.

Applicant's Name		Retired? <input type="checkbox"/> Yes <input type="checkbox"/> No		Co-Applicant's Name		Retired? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Address				Address			
City		State		City		State	
Zip Code				Zip Code			
Telephone No.		Birth Date		Telephone No.		Birth Date	
Occupation (current or past)				Occupation (current or past)			
Drivers License #				Drivers License #			
Have you ever been convicted of a felony or misdemeanor? <input type="checkbox"/> Yes <input type="checkbox"/> No				Have you ever been convicted of a felony or misdemeanor? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If so, what and when? _____				If so, what and when? _____			
_____				_____			
List all names of family members who will reside full time on the campsite: _____ _____ _____							
Will any pets reside with you? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, what kind? <input type="checkbox"/> Dogs <input type="checkbox"/> Cats <input type="checkbox"/> Other: _____ How Many? _____							
Would you be willing to be a host at a rustic campground? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, when? _____							
Have you served as a Volunteer Host before? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, where? _____ Dates Served: _____							
What kind of camping equipment will you use? <input type="checkbox"/> Tent <input type="checkbox"/> Motor Home <input type="checkbox"/> Trailer/Camper Length of Unit: _____							
List the names of State Parks you are interested in being a Volunteer Campground Host at: _____ _____ _____							
<b>Please list two personal references: Relationship to you (i.e. Friends, Business Associate, Family)</b>							
Name				Name			
Address				Address			
City		State		City		State	
Zip Code				Zip Code			
Telephone No.		Relationship		Telephone No.		Relationship	
What special interests do you have?				What special talents do you have?			
_____				_____			
_____				_____			
<b>In case of emergency, please provide the following information:</b>							
_____							
Person's Name (not living with you) to be notified				Telephone No.			
I understand that all the information I have willfully provided on this application is required under the authority of the Michigan Department of Natural Resources for the safety and well being of all persons who utilize public campground facilities and that this information will become public record. I understand that a criminal history check may be obtained prior to my appointment as a campground host. I also understand that once I have accepted a host assignment, I cannot change my assignment to another State park and will provide notice should I/we need to leave. I certify that this information is complete and true. I agree to perform the minimum required activities.							
I agree to abide by Department Policy, State and Federal laws which prohibit discrimination in employment, education, housing, public accommodations, law enforcement or public service based on religion, race, color, national origin, age, sex, marital status, height, weight, or disability.							
Applicant's Signature				Date		Co-applicants Signature	
						Date	

Mail to the State Park where you are interested in serving as a campground host.

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